PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10630603

| TOTAL CLAIMS | CLAIMS AS FILED - PART I SMALL ENTITY OTHER THA | | | | | | | | | | | | |
|--|---|-------------------|----------------------|------------------------------|----------------|--------------|------------|------------|-----------|--------|-----------|------------|------------------------|
| TOTAL CLAIMS | | | | (Column | | | | OR | | | | | |
| FOR | TOTAL CLAIMS | | | 28 | | | | RATE | | FEE | 7 | | FEE |
| TOTAL CHARGEABLE CLAIMS | FOR | | | NUMBER FILED | | NUMBER EXTRA | | BASIC | EE | 375.00 | OR | | |
| NUMBER ADDIT FEE ADDIT F | TOTAL CHARGEABLE CLAIMS | | | W minus 20= | | * 8 | | X\$ 9 | = | | - | | lidii |
| # If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) | INDEPENDENT CLAIMS | | | 3 minus 3 = | | * 0 | | X42- | | | 1 | | 799 - |
| * If the difference in column 1 is less than zero, enter "0" in column 2 **CLAIMS AS AMENDED - PART II **Column 1)** **CLAIMS AS AMENDED - PART II **Column 2)** **Column 3)** **CLAIMS NUMBER PREVIOUSLY PAID FOR PA | | | | | | | | | | | OR | | |
| CLAIMS AS AMENDED - PART II | * If | the difference | e in column 1 is | less than zero, enter "0" in | | | column 2 | L | | | | | 000 |
| Column 1 Column 2 Column 3 SMALL ENTITY OR SMALL ENTITY | | | | | | | * | ТОТА | L | | OR | | 894 |
| REMAINING | | | | | | | | | | NTITY | OR | | Access to the |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | ENDMENT A | | 'REMAINING AFTER | | NUME PREVIC | BER JUSLY | | RATE | | TIONAL | | RATE | ADDI- TIONAL FEE |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | ** | | = | X\$ 9= | • | | OR | X\$18= | |
| +140 | AM | | | | | CLAIM | = | X42= | | | OR | X84= | |
| ADDIT. FEE (Column 1) (Column 2) (Column 3) REMAINING AFTER AMENDMENT Total * Minus *** Independent * Minus Independent * Minus | | | in the second second | JEIII EE OEF | LINDEINT | CLAIIVI | | +140= | | | OR | +280= | |
| Column 1 Column 2 Column 3 | | | | | | | | | | ···· | OB | TOTAL | |
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| REMAINING AFTER AFTER PREVIOUSLY PAID FOR TOTAL ADDITIONAL FEE TOTAL TOTAL ADDITIONAL FEE TOTAL | | | | | | | (Column 3) | | | | | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | NDMENT B | | AFTER | | NUME PREVIO | BER USLY | | RATE | | TIONAL | | RATE | ADDI- TIONAL FEE |
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| Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT Total ** Minus *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20" OR TOTAL ADDIT. FEE OR ADDIT. FEE ADDIT. FEE ADDIT. FEE OR ADDIT. FEE ADDIT. FE | | FINOT PRESE | INTATION OF MIC | JUIPLE DEP | ENDENT | CLAIM | | +140= | 1 | | | +280= | |
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| REMAINING AFTER AMENDMENT Total * Minus *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20" ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20" ** TOTAL ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20" ** TOTAL | | | | | | | (Column 3) | | | 5 | ×- | 1.6 | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." OR +280= ** TOTAL | NDMENT C | | AFTER | | NUMB PREVIO | ER USLY | | RATE | | ONAL | | RATE | ADDI- TIONAL FEE |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." OR +280= ** TOTAL | | Total | * | Minus | ** | | = | X\$ 9= | 1 | | | X\$18= | 1 |
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| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." OR TOTAL | | FIRST PRESE | NTATION OF ML | ILTIPLE DEP | ENDENT | CLAIM | | | 4 | | OR | X84= | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20 " | * 11 | the entry in colu | mn 1 is less than th | e entry in colum | ma 2 write | '0" is sel | umn 3 | +140= | | | OR | +280= | |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1 | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEEOR ADDIT. FEE | | | | | | | | | | | | |